



**Forecast of
Social Return on Investment
of Workwise Activities
(April 2009 to March 2010)**

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Executive Summary

This report presents a forecast of the social return created by Workwise activities.

Workwise aim to successfully develop and train people with mental health problems in a genuine business environment to encourage self-esteem and independence through work, and thus contribute to their quality of life.

What's it all about? *Trainee SL has long and enduring mental health problems and when he first started at Workwise he couldn't sit down with other people, or face them. At breaks he needed to stand facing the wall on his own. Gradually his condition improved and his confidence grew. Communications took some time, but as he was very bright he really thrived on learning new skills and Workwise were able to engage with him through training. It turned out that he was an excellent designer and he now has a number of patents to his name. Recently he has been really helpful volunteering to teach new Workwise trainees CNC techniques. He has gained a qualification to teaching adults in further education and now teaches Workwise trainees.*

Every day our actions and activities create and destroy value; they change the world around us. Although the value we create goes far beyond what can be captured in financial terms, this is, for the most part, the only type of value that is measured and accounted for. As a result, things that can be bought and sold take on a greater significance and many important things get left out. Decisions made like this may not be as good as they could be as they are based on incomplete information about full impacts. Social Return on Investment (SROI) is a framework for measuring and accounting for this much broader concept of value. Workwise have used SROI to understand the impacts of their activities and show how they understand the value created, manage it and can prove it.

The change as a result of Workwise activities for each of their stakeholders has been explored from the perspective of the stakeholder, measured and valued and recorded on an impact map. Positive and negative, intended and unintended changes have been considered. The amount of change that will happen anyway and/or will be down to others has also been estimated and taken into account.

Social change that this analysis explored and estimated the value of includes:

- As a result of structured day placements, trainees are engaged in purposeful activity that they consider 'worthwhile'.
- As a result of attending Workwise, trainees' confidence and motivation is increased and they develop design skills and potential. Trainees' mental well-being, self-esteem and motivation is increased by having their products and art accepted for sale. However, some trainees may find environment and support networks too structured and feel that they no longer have control over their lives.
- As a result of 1-to-1 support sessions, trainees become work ready and some gain employment. However, some also develop dependence on Workwise and support networks and find it harder to move on.

- As a result of ongoing support, trainees' independence and work readiness is increased and they deal positively with work related mental ill health issues.
- As a result of training and work experience in associated dept./social enterprise, trainees begin learning toward qualifications, while also using those skills and working in a supportive, but real business environment.
- As a result of transport and access support, trainees' mental well-being is improved (improved confidence, self-worth, self-reliance and a new pride and motivation in their achievements). Families/Friends also have less pressure/more time as trainees access service by public transport and so increase their independence.
- As a result of support to businesses, employers are mindful of mental health issues

This analysis estimates that for every £1 invested in Workwise activities there is social value created in the range of £2.47 to £3.09.

As this is a forecast analysis, Workwise have identified steps to collect actual data and improve the analysis during the course of the delivery of these activities. Workwise will revise this analysis at the end of the activities to produce an account of the actual social return.

Assurance Statement

This report was submitted to the SROI Network Assurance Panel of 17th Nov 2009.

This report has been submitted to an independent assurance assessment carried out by The SROI Network. The report shows a good understanding of the SROI process and complies with SROI principles. Assurance here does not include verification of stakeholder engagement, data and calculations. It is a principles-based assessment of the final report.

Acknowledgments

The SROI training and oversight of the process was provided by Tim Goodspeed (the SROI Network), the primary research and draft impact map were prepared by Mandy Turner (Workwise) and this report was written by Tim based on information provided by Mandy and Workwise.

Addendum

March 2010

In this report, it is assumed that none of the expenditure items considered as investments are capital.

Scope and stakeholders

1.1. Workwise: activities, objectives and values

Workwise (Suffolk) Ltd started in 1986 and has evolved over the last 22 years into a leading social enterprise and employment training organisation for adults suffering long and enduring mental health problems. Based in Bury St Edmunds, the organisation comprises a small administrative building funded by local health partnership NHS Trust on their Hospital Road site, two industrial buildings housing Workwise's workshops and social enterprises on the Moreton Hall industrial estate in Chamberlayne Road and Cavern4, a retail outlet with exhibition gallery, in Whiting Street, Bury St Edmunds.

Workwise Mission Statement

Workwise's aim is to successfully develop and train people with mental health problems in a genuine business environment to encourage self-esteem and independence through work and thus contribute to their quality of life.

Capacity

Workwise are currently providing 105 trainees day placements a week and 96 on job search/back to work programmes in an outreach capacity. This is not total capacity but as a forecast for the coming year it was safer to go with this figure as a good average of previous year's numbers. Workwise have capacity for at least to 50 more day places and possibly doubling Workwise's outreach work, although that would have other implications on staff numbers, etc.

1.2. Social return on investment (SROI)

Every day our actions and activities create and destroy value; they change the world around us. Although the value we create goes far beyond what can be captured in financial terms, this is, for the most part, the only type of value that is measured and accounted for. As a result, things that can be bought and sold take on a greater significance and many important things get left out. Decisions made like this may not be as good as they could be as they are based on incomplete information about full impacts. Social Return on Investment (SROI) is a framework for measuring and accounting for this much broader concept of value.

SROI is an approach to understanding and managing the impacts of a project, organisation or policy. SROI is a framework to structure thinking and understanding. It's a story not a number. The story should show how you understand the value created, manage it and can prove it.

SROI seeks to reduce inequality and environmental degradation and improve wellbeing by incorporating social, environmental and economic costs and benefits.

SROI measures change in ways that are relevant to the people or organisations that experience or contribute to it. It tells the story of how change is being created by measuring social, environmental and economic outcomes and uses monetary values to represent them. This enables a ratio of benefits to costs to be calculated. For example, a ratio of 3:1 indicates that an investment of £1 delivers £3 of social value.

SROI is about value, rather than money. Money is simply a common unit and as such is a useful and widely accepted way of conveying value. In the same way that a business plan contains much more information than the financial projections, SROI is much more than just a number. It is a story about change, on which to base decisions, that includes case studies and qualitative, quantitative and financial information.

SROI is a principles based methodology. The principles, a Cabinet Office sponsored Guide to SROI and further information are available at: www.theSROInetwork.org. The guide documents the standard approach to SROI. This analysis has been carried to the standard approach.

This report does not contain an explanation of every step of the SROI process. Where appropriate, steps have been summarised to be clear that they have been carried out. For details of what is involved in any steps, why they are important and a worked example, the Cabinet Office sponsored Guide to SROI should be referred to.

1.3. Scope of analysis: Activity, beneficiaries, type, purpose and period

As each part and department of Workwise relies to some extent on other areas/departments for overall results, it was decided that the whole organisation would be included in the project.

Strategic Context

Workwise have always felt that to fulfil both their mission statement and their quality statement, it is important that they analyse what they do and what difference they make to their client group. Workwise felt that in undertaking this project to learn how to and to produce an SROI report, they had a perfect opportunity to demonstrate their social impact on mental health. It would also be used, both for development as a third sector organisations and to give funders and commissioners a clearer picture to help them make more intelligent investment and/or purchasing decisions about Workwise. Therefore a forecast for the coming year would give Workwise a starting point to consider any impact the changes will have on Workwise and their client group.

The forecast year for these trainees will be different from any other in that they will now be starting to take control of their own personal budgets and, arguably, they will have more choice as to how they gain their outcomes.

Objectives

The objectives for this analysis were, therefore, to:-

- Make use of the training and support available to produce an Impact Map and SROI Report as a **Forecast for the year April 2009 to March 2010 for Workwise** as an organisation.
- To identify suitable indicators that would enable Workwise to measure outcomes and social impact for mental health of providing supported work-experience and training within the framework of social enterprise.
- To produce a working document that can be used to demonstrate the social value of investing in Workwise

- To make a forecast as a base for identifying changes necessary to sustain and improve Workwise's social value.

Primary Beneficiaries

In line with Workwise's aims to develop and train people with mental health problems, the main beneficiaries of Workwise's activities are people with mental health problems.

1.4. Stakeholders: stories of change

Trainee TR

Very shy and nervous when she first started to attend, TR wanted to try the office administration and refresh IT skills. She got on well with the taster and she was soon up to doing two days in the office, and she has taken on more responsibility including doing the tuck money and performing tasks within the office to assist with the running of the business administration. TR also makes sure that the expenses are dispersed for our Chamberlayne Road site. She talks more, able to take instruction effectively and is enjoying her time with Workwise. She has progressed since being here and appears more confident and her self-esteem has grown.

Trainee SJ (in his own words)

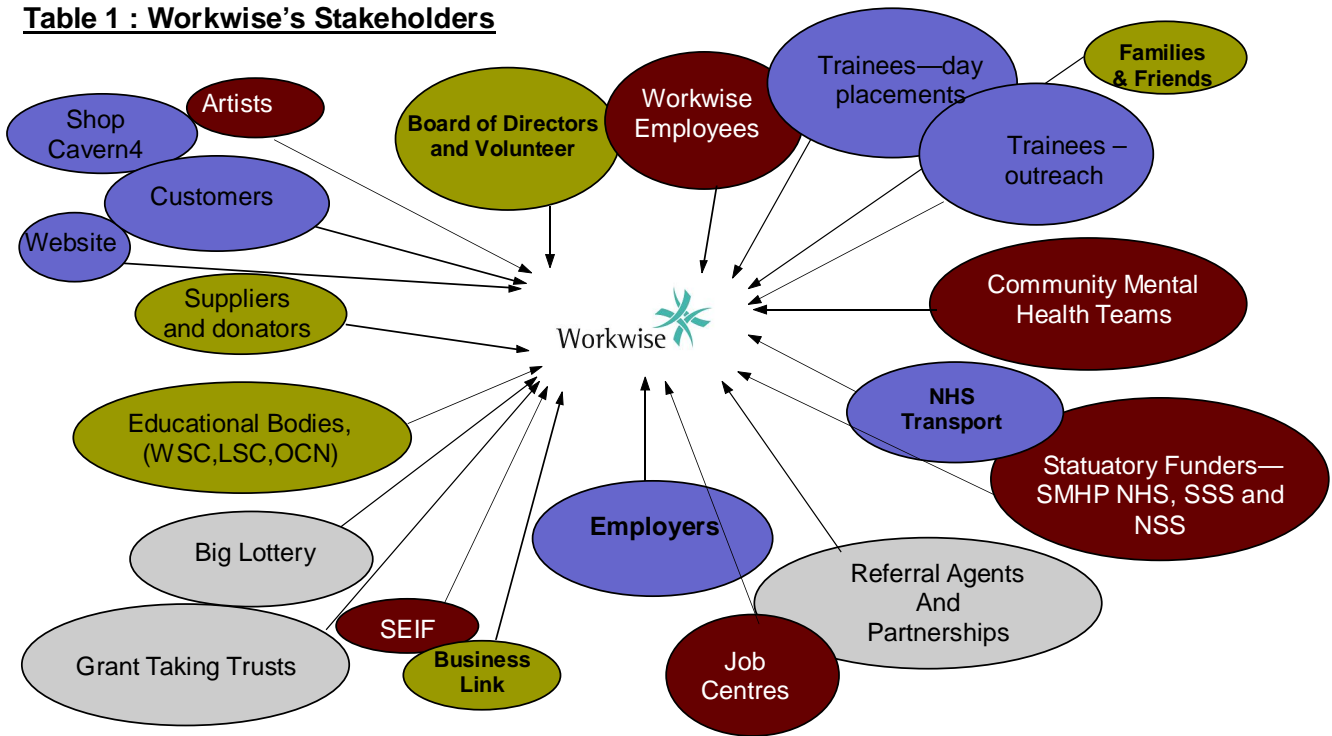
I started attending Workwise as I wanted to get support to get back into some form of employment and help to develop new skills. I wanted advice on suitable training courses, and I needed to build my confidence up again after going through a bad time. I started working with the Textiles instructor to create new designs and as the new retail outlet was opening, only the best quality items would be going to the shop, and mine was one of them. I worked on cushions, quilts, bags, seasonal goods including Christmas stockings and decorations.

It is such an amazing feeling that my work is being displayed in the shop and to actually have it sold is such a big confidence boost for me. Some of my products have sold and it's the knowledge that someone wanted my work; somebody liked my work enough to buy it. Workwise has helped me find direction and is still continuing to support me.

1.5. Stakeholders: analysis and sub-groups

Stakeholder analysis

Table 1 : Workwise's Stakeholders



Trainees are Workwise's main stakeholders for whom the organisation exists. It was felt right to divide them into those who attend Workwise for work-experience and training on day-placements (see *Trainees on Day placements*) and those who are mainly seen on outreach as a part of Workwise's employment advisory services, (see *Clients using outreach services*). This is basically because they use the service differently, but in the end their outcomes are similar, but on a different timescale.

It should be noted that mainly, but not exclusively, the first group are on the Care Plan Approach (CPA) and hold a care plan with their community mental health team. The second group in the outreach situations are usually more job ready requiring support in job search, CV and career matching. They are less likely to be on a care plan and often self refer or come from the Job Centre Plus. With this group they will only take up a day-placement and/or training qualification should that need be identified during an Information Advice and Guidance (IAG) session as a suitable progression route for them.

Family and Friends of adults suffering from mental ill health are often badly affected by the onset of loved ones developing a mental health problem. Workwise therefore surveyed a good cross section to see if they felt that placement at Workwise was beneficial to the trainee and if they had noticed any difference in mental well-being. Approximately 50% of Workwise's trainees are receiving benefits. It should also be remembered the impact this has on families of both groups.

The Big Lottery has been an important funder for Workwise and especially for the set up of their shop, Cavern 4 in Whiting Street, Bury St Edmunds.

Grant Making Trusts (*Rank Foundation £15,000; Henry Smith Charity £16,782; Lloyds TSB Foundation £21,000*) provide salaries and capital social firm development.

Statutory Bodies (*SMHP NHS Trust, Primary Care Trust, Social Services Suffolk, Social Services Norfolk*) It is in their interest that adults with mental health issues have support towards recovery and ultimately the opportunity to contribute to their community by living a useful and responsible life.

Referral Agents (*Community Mental Health Teams; Job Centre Plus, GPs, Link workers, other agency Partnerships, social services and hospital mental health wards*) are vital to Workwise in encouraging and facilitating use of their service.

Board of Directors and Volunteers have been put together as one but include (1) all Directors who work for Workwise in a voluntary capacity and (2) other departmental volunteers.

Workwise staff gives much of themselves to the organisation but gain the outcome of job satisfaction in the successful progression of trainees.

SEIF have provided much support in social enterprise development as well as money for up-to-date equipment to facilitate new work and production within the social enterprise.

Business Link has also given the organisation good support and financial help in various ventures.

Educational Bodies (*West Suffolk College, Learning & Skills Council, Open College Network*) Workwise is a partner provider with the West Suffolk College for delivery of adult training and as such draws down training provision money for Workwise for the courses they deliver which provides them with status, QA support and some assisted staff training opportunities in return for assistance in their quota of delivery to minority disabilities provision.

Suppliers/donators have been included because Workwise have had the good fortune to find suppliers who can provide them with free materials that they would otherwise be disposing of in landfill sites.

Public, local community and Customers (*Cavern4, website sales, direct sales and commissions to the workshop*) are important stakeholders in social enterprise and the sale of products.

Artists initially provided the shop, Cavern4, with exhibitions for the gallery, but also they augmented products to add variety and also to take pressure of the social enterprises.

Employers in the local community have been involved with Workwise through offering job opportunities and being involved in Workwise awards (promoting well-being in the work-place).

Suffolk Mental Health Partnership Trust –Suffolk Mental Health Partnership Trust provide Workwise's administration building and also use of their transport system to help with access for those of their client group.

1.6. Stakeholder involvement

A summary of stakeholders and their involvement is shown below. Details of stakeholder consultation are included in the following section on data sources.

Stakeholders	Size of group	Material?	No. involved	How involved
Trainees -who spot purchase for day places	105 day places/week	Very material	24 completed survey	All took interest, some interviewed others, who needed help with forms, to complete the survey. Also used regular annual questionnaire to cover some areas
Trainees - employment provision (those who access services other than day placements)	114 people most on Next Step – this project had complete and those still with us were moving on to ESP which was not quite set up at this stage so these numbers are artificially low	yes	54 Worklink outreach	There was not time to survey this group as it was very much in flux so Workwise used end of programme comments, where available.
Families / friends of trainees	Could be 200 or more but in fact it is only the number of people our client group wish to confide in	yes	10 surveys returned to us	46 trainees were given the choice to take home a survey for family or friends if they wished. Under 20 actually did and only 10 came back.
Employers	57 business in Bury St Edmunds and 77 in Ipswich invited to Business Minded conferences	yes	Of these businesses many have joined a group working toward being Mindful employers	Not directly consulted for forecast
Big Lottery	1 organisation	yes	1	Not directly consulted for forecast
Grant Making Trusts (see list)	3 organisations:- Grant Making Trusts (Rank Foundation £15,000; Henry Smith Charity £16.782; Lloyds TSB Foundation£21,000)	yes		Not directly consulted for forecast
Statutory Funders	Statutory Funders -(Suffolk County Council & Norfolk CC)	yes	6 CMHT refer to us and were surveyed	Most too busy to fill in the survey but 3 of 6 rang back with verbal comment
Business Link	1 organisation	yes		Not directly consulted for forecast

SEIF	1 organisation	yes		Not directly consulted for forecast
Adult Further Educational funding West Suffolk College	2 organisations Adult Further Educational funding (West Suffolk College; Suffolk Learning Consortium)	yes		Not directly consulted for forecast
Employees	15 people	yes	12	Discussed service and how it can be improved.
Directors and Volunteers	4 people	yes	3	3 returned surveys emailed to them
Suppliers who become Donators (in kind)	4 -org's: British Velvet, Vanner Silks, Leather salesman (retiring), Ulster Weavers	yes		Not directly consulted for forecast
Referral Agents- (see list)	6 CMH Teams (see under Statutory) Job Centre Plus, disability, Suffolk GPs West Suffolk Hospital MH ward Shaw Trust	yes		Job Centre Plus were asked and returned a survey
Public and local community - Customers	General Public – can't give a number	yes		General comment and continued sales
Artists	75 people not all at once, but have displayed art in the gallery or sold in the shop	yes		Not directly consulted for forecast
Suffolk Mental Health Partnership Trust	1 organisation		1	Not directly consulted for forecast

1.7. Data sources

Much of the primary data for this analysis was gathered in a survey managed by the trainees themselves and staff were instructed not to get involved or to influence in any way. (This followed an earlier exercise where it was clear that trainees were providing the answers that they thought the trainers and placement supervisors wanted to hear). From the trainee survey Workwise were able to show their expectations in coming to Workwise and to what extent they were met.

The questions included,

For trainees:

- *Before you were involved with Workwise, what were the things you wanted to change in your life*
- *What has changed since you started working at Workwise?*
- *What might have happened for you if you had not been able to come to Workwise?*

For family/friends/carers:

- *Before the trainee was involved with Workwise, how did their mental ill-health affect your life?*
- *Have you noticed any changes since they have been working at Workwise?*

Volunteers and referrers were also surveyed.

A copy of the survey forms is included in annex B.

Given that this is a forecast, it was harder to get appropriate data from stakeholders on how they might prove that anything would change (suggesting indicators) or what it would be worth to them (suggesting financial proxies). However, this was attempted with volunteers who were asked to estimate the value of their time. It is recommended that Workwise can improve on this when reconciling this analysis with actual data at the end of the period of activities by asking all stakeholders 'what evidence they might offer of change' and 'what was the change worth to them'. Workwise may opt for a little additional support in preparing questionnaires when gathering actual data.

Some existing data was also used that had not benefited from a SROI specific survey and included potentially leading questions asking 'what trainees had gained' rather than 'what changed for the trainees'. Again, it is recommended that Workwise can improve on this when reconciling this analysis with actual data at the end of the period of activities.

Information from trainee records provided numbers achieving qualification, those progressing to various types of employment or voluntary work and similar 'easy to measure' statistics, often using existing data.

Workwise also felt that it was important also to hear the feelings of the families and friends¹ of trainees and therefore sent a survey to them. Again this was a voluntary survey. Workwise offered the forms to the trainees to take home if they wished and stressed that they were not to be involved in the responses and no names were to be mentioned. Although only half the trainees took forms, all that went out came back, some posted separately to staff and many with gratifying comments which Workwise were keen to find a way to quantify as social impact was clear.

Measurement from this type of surveys can't always be totally relied on, but Workwise felt that they had done enough in the short time available to get a clear and unbiased set of results.

It was decided that Workwise should also ask for opinions from their referrers, as it is their input and perception of the impact of Workwise for their clients that encourages them to refer. Workwise didn't have much time in which to conduct a full-scale survey but was able to acquire an overall response from the Community Mental Health teams and from the Jobcentre Plus disability advisors, which Workwise could use as a good consensus of opinion.

From the point of view of Workwise's new partnership ESP, referrals are only just starting and procedure is still being developed, however their input and opinion will be sought later in the year. Also Workwise are mindful that effectively all trainees could be said to "self-refer" in

¹ According to the respected "Psychiatric Morbidity Survey", one in six of us would be diagnosed as having depression or chronic anxiety disorder, which means one family in three is affected. [LSE Depression Report, June 2006]

future as they start to use the new direct personal payments and make choices within their allocation.

Workwise doesn't have a lot of volunteers. Those Workwise have fall into 2 categories: (i) Directors and external business connections who give of their time and expertise freely to help and advance the organisation. (ii) Ex-trainees who for whatever reason (age/financial settlement/maintaining CV/desire to help others/keep in touch etc.) offer help to whichever department of social enterprise that can best use their experience and skills. Workwise included a survey for both these groups and received a good response.

Other information relied on Workwise's own records and financial statements and forecasts and known funding agreed for the coming year.

2. Outcomes and evidence

2.1. Impact Map

The change identified for each stakeholder was explored, measured and valued and recorded on an impact map. Appropriate sections of the impact map are, therefore, included throughout this report. However, this report is best understood when read together with a copy of the full impact map.

2.2. Describing Activities – Inputs and outputs

This forecast has been made as accurate as possible with all known figure used and those which can't be given yet have been based on the last year's figures. The key activities under analysis are:

- Structured day placement for work experience and skills acquisition in one of a number of key skill areas. Trainees receive a useful and reemployment support partnership responsible job in a structured, supportive, real working environment to quality commercial standards.
- Access to workplace -assistance with transport to get to work
- Getting individuals with MH problems to get out of the house, communicate with others and improve skills and job awareness in an up-to-date working environment.
- National training qualifications taken in supportive environment embedded in work placements
- Support sessions one-to-one with client to create a personal progression route. Trainees receive support in getting to work, follow-up to non-attendance, support with issues that prevent regular work or good team work, career guidance and Info Advice & Guidance. Then for those who have become job ready, a CV and support into job search and work.
- Opportunity to gain career matching, creating a CV and job search through to employment
- Ongoing sessions with client with guidance to fulfil their goals. Info Advice & Guidance Sessions on career matching, job search, employment work skills, CV production and support on dealing with employers and mental health issues
- Quick reemployment support partnership response to client problems either for interview, in work retention or mental health recurrence
- Training and work experience in associated dept./social enterprise
- Consultancy for business to support staff with MH problems
- Employment outcome, skills training, qualifications, trainee self esteem, confidence and employability skills; job search, career matching, coaching, Info Advice & Guidance, sign posting, life skills, communication skills, job retention, business knowledge and CV preparation

- Supported marketing projects and expertise in tender writing
- Developing social enterprises further
- Producing a SROI report with Workwise as a training exercise

These activities are summarised and quantified on the impact map.

Stakeholders	Inputs		Outputs
Who will we have an effect on? Who will have an effect on us?	What will they invest?	Value £	Summary of activity in numbers
Trainees -who spot purchase (or use their direct payments) for day places	Time, effort, commitment, skills and previous experience	£133,495.00	105 day placements for work experience and skills.
			Access to workplace - 3000 seats in hospital transport a year
			105 individuals with MH problems encouraged to get out of the house, communicate with others and improve skills and job awareness in an up-to-date working environment.
			90 training places towards national qualifications (embedded in work placements) E9
			440 1-to1 support sessions
			440 careers info, advice and guidance opportunities (career matching, CVs, job search)
Trainees - employment provision (those who access services other than day placements)	Time, commitment, effort	£0.00	1026 careers info, advice and guidance opportunities (career matching, CVs, job search)
		£2,500.00	40 reemployment support sessions (interviews, work retention, mental health recurrence)

Stakeholders	Inputs		Outputs
Who will we have an effect on? Who will have an effect on us?	What will they invest?	Value £	Summary of activity in numbers
	5 clients choosing to make a commitment to purchase training	£0.00	7 day placements for work experience and skills
Families / friends of trainees	Care and concern	£0.00	
Employers	time money and job opportunities		4 pieces of consultancy work
Big Lottery	Funding	£32,790.00	
Grant Making Trusts (see list)	Funding -Salary and development costs for furniture making department Shop Manager salary Employment Advisor salary	£53,300.00	
Statutory Funders - (PCT, Suffolk Social Services, Norfolk Social Services) employment support partnership tendering partners (similarly funded and working with Workwise in partnership via Shaw Trust)	Transitional fee to cover fund changes between April09 and June 09 (£25,000)	£25,000.00	
	Norfolk Social Services including spot purchases	£32,964.00	
	Partners with PCT - Mental Health Pooled funding for 2 Employment Advisors (£ 75,000) 10x 2 hours group training sessions for Worklink £7500	£73,749.00	
Business Link	Business Support	£1,500.00	2 marketing projects
SEIF	Business Support	£18,300.00	2 social enterprises developed
	Consultancy - SROI training		1 SROI report
Adult Further Educational funding West Suffolk College	QA checks of Workwise training systems and draw down of funding for course delivery Provision of qualification awarding body EV visits.	£42,112.44	
	Access to staff training		
Employees	Time, commitment, effort, skills, expertise and experience.		15 staff employed
Directors and Volunteers	Time at variable wage equivalent of at approximately £40 an hour for 36hours a year	£1,440.00	10 board meetings providing accountability and strategic planning
	Time at variable wage equivalent of approximately £8.50 an hour for average of 6 hours a week	£2,448.00	Supporting staff members in key areas
Suppliers who become Donators (in kind)	Unwanted products and materials		10 parcels of materials

Stakeholders	Inputs		Outputs
Who will we have an effect on? Who will have an effect on us?	What will they invest?	Value £	Summary of activity in numbers
Referral Agents-(see list)	Time, effort, skills,		Progression for their clients to improve and sustain recovery from mental ill health and move them towards reliance on services
Public and local community - Customers	Money, investment, time, effort/interest	£55,320.30	Income for Workwise Personal Income for sale of own products
Artists	Value of profit to Workwise	£12,360.00	£28,800 of sales
	Products, time, flare and effort.		77 artists
Suffolk Mental Health Partnership Trust	Supported care of building, surrounds and peppercorn rent for site		Use of NHS Trust building on site at Hospital road
	Provision of transport services for people on care plan approach	£3,178.00	Transportation to and from work for 2758 return journeys per year
Total		£490,456.74	

2.3. Theory of change - Outcomes

The theory of change is summarised by the following extract from the impact map.

For some stakeholders, particularly funders, the changes that are most material (significant) to them are changes that occur to other stakeholders, mostly trainees. However, the stakeholders, their inputs and the changes are all important parts of the story of change, so the change is shown against the stakeholders that change, leaving some rows blank on the impact map where there is no material change for a stakeholder.

Mental Health measurement - Client journeys

For the last six years Workwise have used outcomes as a measure of mental well being of its client group. There are a number of different approaches in current practice and Workwise have looked at many of these over the years while developing e own system based on soft outcomes and distance travelled.

The method uses a set of 18 baseline statements similar to the 14 employed in the WEMWBS². These statements are put to the individual at various intervals on their "journey" and recorded on a scale 1>10, a method used that is based on a Likert³ scale. However the responses are reliant on the mood and feeling of the person at that moment in time and although it provides a way of quantifying positive mental health, it should only be taken as an average gauge of

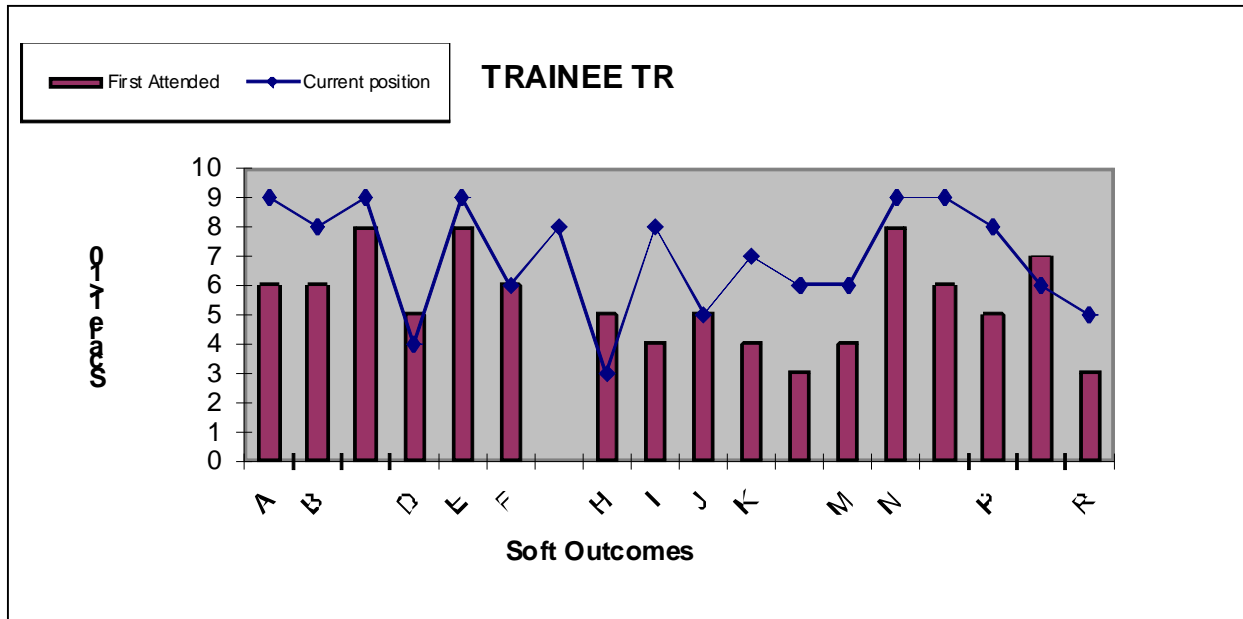
² WEMWBS – Warwickshire-Edinburgh Mental Well-Being Scale

³ Likert scale- method of measuring attitudes that ask respondents to indicate their degree of agreement or disagreement with statements, according to a point scoring system 2000

progression and it is not always accurate to read too much into one result. It can also be noted that because of more personal awareness some statement responses may go down before they go up as the individual gains a more realistic outlook of themselves.

Examples of the statements used in assessment of outcomes and an example of the trainee journey can be seen here.

- A I enjoy communicating within my team.
- B I respond well to new situations/team members.
- C I take care of my appearance and personal hygiene.
- D I'm hopeful about my future.
- E I try to be on time for appointments or commitments.
- F I have difficulty getting up in the mornings.
- G I can listen to instructions and follow them through.
- H I find dealing with people in authority manageable.
- I I will ask questions if I don't know what to do next.
- J I find it hard to apply drive and determination to what I do.
- K I can concentrate and remember what I have learnt.
- L I feel respected and valued by others.
- M I find following written instructions easy.
- N I dislike being asked to do things the way others want them done instead of my way.
- O I take a pride in the work I do/products I produce
- P I'm proud of the things I've achieved
- Q I'm well organised
- R I can see a direction/goal and feel I'm making progress



Trainee expectations of what Workwise could offer them was as follows⁴: -

45.5% of responses cited lack of confidence and finding it difficult to get out of the house; they felt they lacked self-esteem and were anxious about communicating with strangers

68% said they wanted something to provide structure to their day with an opportunity to learn/work at new skills and use their time usefully. (Many of these cited that they wanted a job, but didn't feel ready to face the job market yet.)

45.5% wanted to learn a new skill/gain a qualification to help them to become job ready, but felt they lacked the motivation, or couldn't cope.

From these responses Workwise were able to determine what trainees most hoped and expected to get from Workwise as stakeholders.

Stakeholders	Outputs	The Outcomes (what changes)
Who will we have an effect on? Who will have an effect on us?	Summary of activity in numbers	Description
		How would we describe the change?
Trainees -who spot purchase (or use their direct payments) for day places	105 day placements for work experience and skills.	Trainees are engaged in purposeful activity that they consider 'worthwhile'
	Access to workplace - 3000 seats in hospital transport a year	Trainees access service by hospital transport (for those to whom public transport is either too difficult or inappropriate to their mental state at that time)

⁴ These figures were covering 22 trainees (those present at the time of the survey) but most cited several reasons for the question: "What were the things you wanted to change in your life that made coming to Workwise part of your plan?"

Stakeholders	Outputs	The Outcomes (what changes)
Who will we have an effect on? Who will have an effect on us?	Summary of activity in numbers	Description
		How would we describe the change?
	105 individuals with MH problems encouraged to get out of the house, communicate with others and improve skills and job awareness in an up-to-date working environment.	Trainees access service by public transport, or own transport, and so increase their independence.
		Trainees confidence and motivation increased
		Trainees develop design skills and potential
		Trainees mental well-being, self-esteem and motivation increased by having their products and art accepted for sale.
		Trainees find environment and support networks too structured and feel that they no longer have control over their lives
		Trainees receive opportunity to learn, towards more job reemployment support partnership responsibilities and for future mainstream employment
	90 training places towards national qualifications (embedded in work placements) E9	Trainees become work ready
	440 1-to1 support sessions	Trainees gain employment
	440 careers info, advice and guidance opportunities (career matching, CVs, job search)	Trainees develop dependence on Workwise and support networks and find it harder to move on
Trainees - employment provision (those who access services other than day placements)	1026 careers info, advice and guidance opportunities (career matching, CVs, job search)	Trainees independence and work readiness increased
	40 reemployment support sessions (interviews, work retention, mental health recurrence)	Trainees deal positively with work related mental ill health issues
	7 day placements for work experience and skills	Trainees begin learning toward qualification while also using those skills and working in a supportive, but real business environment
Families / friends of trainees		Trainees mental well-being improved (improved confidence, self-worth, self-reliance and a new pride and motivation in their achievements)
		Families/Friends have less pressure/more time as trainees access service by public transport and so increase their independence.
Employers	4 pieces of consultancy work	employers mindful of mental health issues
Big Lottery		<i>material changes shown in trainee and Cavern4 outcomes</i>
Grant Making Trusts (see list)		<i>material changes shown in trainee outcomes and social enterprise</i>
Statutory Funders		<i>Material outcomes for trainees (trainees recovery sustained)</i>
Business Link	2 marketing projects	<i>Material outcomes for trainees</i>
SEIF	2 social enterprises developed	<i>Material outcomes for trainees</i>
	1 SROI report	
Adult Further Educational funding West Suffolk College		West Suffolk College's meet requirement for inclusion of a disability group

Stakeholders	Outputs	The Outcomes (what changes)
Who will we have an effect on? Who will have an effect on us?	Summary of activity in numbers	Description
		How would we describe the change?
		West Suffolk College keep their numbers of special disability delivery up by support of Workwise as a Partner Provider.
Employees	15 staff employed	Workwise staff have job satisfaction
Directors and Volunteers	10 board meetings providing accountability and strategic planning	directors and volunteers feel they make a difference to others - <i>material change for others (employees, trainees, etc) identified above</i>
	Supporting staff members in key areas	
Suppliers who become Donators (in kind)	10 parcels of materials	<i>Material outcomes for trainees (trainees develop new designs to suit materials received)</i>
		Income for social enterprise from supply of materials that increases profit margin of products
Referral Agents-(see list)	Progression for their clients to improve and sustain recovery from mental ill health and move them towards reliance on services	Referral agent's client lists are reduced as trainees become less reliant on Community Mental Health services
Public and local community - Customers	Income for Workwise Personal Income for sale of own products	<i>Material outcomes for trainees</i>
Artists	£28,800 of sales	<i>Material outcomes for trainees</i>
	77 artists	Artists acknowledging the standard of products produced by trainees is comparable to theirs
Suffolk Mental Health Partnership Trust	Use of NHS Trust building on site at Hospital road	Allowance for rent of building on NHS site for Workwise as a independent provider of services for mental health as rated by the Trust
	Transportation to and from work for 2758 return journeys per year	<i>Material outcomes for trainees</i>

There are 2 areas of potential overlap in this theory of change which require discussion.

- a) Identifying changes that could appear similar or identical:
 - Well-being
 - Confidence
 - Self-worth and self-esteem

- b) Double counting changes that are connected in chains of events:
 - Learning and skills (which leads to)
 - Job readiness (which leads to)
 - Employment.

Apparently similar changes

Well-being, confidence and self-esteem can sometimes be grouped together and are often best measured or valued by similar indicators and financial proxies. These areas of development in

an individual's life will also often result from a group of integrated activities, again leading to a temptation to group them together as a group of hard to measure changes as a result of a range of interventions or activities. However, they are in fact very different things and should not be grouped together.

Well-being, as reported by family and friends in this theory of change, results from the structure of a day provided for trainees, whose purpose was to get out of the house to do a "job" that they consider worthwhile, not just "occupying them". Workwise have also included motivation and a sense of purpose here. For instance, for trainees, many couldn't, and often still can't at first, see any reason to get out of bed, wash, dress in clean clothes or even have any clean clothes, and get themselves into a situation where they have to talk to others, face new challenges and act in a normal social way. For these people lasting to tea break without a cigarette is a challenge.

Confidence is hard to show but is something those working with the trainees identify as they find they can do real work and can return to learning, even learning skills they never had the opportunity to learn before or didn't think they would be good enough to take on.

Self-esteem was actually described in the surveys by a number of trainees as being "self-worth" and was an extra bonus as Workwise had not been aware of it.

Chains of Events

A progression for a trainee from learning, or from each activity, **can** lead to jobs, but it can lead to many different outcomes and directions that depend on trainee action plans. Also, each milestone can take different people a different amount of time so it is not appropriate in every case to assume that one thing leads to another (that training leads to employment, for example). Differences in stage of illness of trainees, differences in diagnosis, severity, previous experience, treatments etc means everyone is different and to lump all together for a set journey would be to lose much of the story of change and what Workwise is about -one doesn't necessarily lead to another, nor do they start in the same place or stage.

However, having said that, some trainees do move on through Workwise activities from one stage to another, starting with structured activities, moving into formal qualifications (in a working environment), becoming 'job ready' and ultimately leaving Workwise (a success!) and gaining employment.

If a chain of events is identified then to count and value every stage of this chain would be to double count and over inflate the value of the change as each stage in the chain will include the value of any stages leading up to it.

To handle this, a further breakdown of the stakeholder sub-groups was considered. But, as every individual has an individual and unique story of change, it was not possible to break them all down. Instead, the analysis has been careful to only include (quantify) trainees in their furthest stage of change where a chain of events has been identified. For example, if a trainee has experienced change in areas of skills development, job readiness and then ultimately employment, then they have not been included in the numbers of trainees who experienced change in areas of skills development and job readiness.

2.4. Negative and unintended change

For every positive or intended change, there is potentially a negative and/or unintended outcome as well. These have been considered and included where appropriate.

It is difficult, by definition, to forecast the unintended change as a result of an activity however, so these have been estimated **in red** on the impact map where it was felt that there could be significant change which needed to be taken into account and explored further in the future. (see section of impact map above).

2.5. Indicators

Much of the achievement that trainees have within Workwise is manifest in harder to measure outcomes and records of these outcomes were used. As results are on a sliding scale 1-10 it is possible to take an average figure for each session and comparing these it is thus possible to totally quantify both improvement and speed of improvement. These outcomes were often subjective. Where this was the case, objective indicators were developed alongside to increase confidence in measurement of the change.

Other organisations' methods for recording and measuring mental well-being, were explored, but not found to be any more objective or accurate.

Some information was taken from a 2008 Trainee Questionnaire. It was supported with a one off survey. This survey was managed by the trainees themselves and staff were instructed not to get involved or to influence in any way. From the trainee survey Workwise were able to show their expectations in coming to Workwise and to what extent they were met.

Each indicator and its source are detailed on the impact map.

One of the obvious indicators for an employment training service is getting trainees back into work, and so, off benefits if possible. Mental health problems are responsible for 40% of Incapacity Benefit claimants⁵, with a further 10% having these as a secondary factor while Incapacity Benefit fraud is less than 0.5%. However it should also be noted that 60% of employers disregard applications from people with mental health problems⁶. Stigma is a continuous battle and it is sad that declaring a mental health problem to an employer is still open to debate⁷.

The DWP reports⁸ of 2006 and 2007 were considered that looked at outcomes based on contracting for the time achieved back in sustained employment. Although Workwise achieves successes, in the recessionary climate of the forecast year, they will not be easily achieved for anyone, let alone people with mental health problems. However, it is not always possible for Workwise to track a trainee once they move on into employment. However there is anecdotal evidence for some trainees.

⁵ Dr Marcus Roberts, Head of Policy and Parliament Unit, Mind in talk on The Crisis that we Face 2006

⁶ Chartered Institute of Personnel & Development (CIPD) survey 2006

⁷ A part of training session from East Of England Mental Health Employment & Learning & Skills Joint Learning Network attended this week by a member of Workwise staff.

⁸ David Freud – DWP Report, chapter 4, 2007 gave a framework for those on incapacity benefit

Trainee BM (reported by Workwise staff)

BM had a high powered job after leaving university but found the pressure was too much. Unfortunately he had a break down and his mental health was seriously affected. When I first met him when I first started at Workwise in 1999 he was enjoying the opportunity to work in the Administration office and planned to complete a level 3 NVQ in administration. Obviously he didn't need this qualification, but needed the structure and in his case the winding down (I found him treating this NVQ like a university research project. At first he was puzzled that I merely wanted to assess him competent at various administrative tasks, but once he got the idea he not only achieved the NVQ but also realised he was happier and well able to work at this level. He started doing a day a week at the reference library in Bury St Edmunds and spending another day using his chemistry skills helping a micro brewery with its brewing.

A year or two later he came to tell me he was very busy with the brewery but also was now employed at the reference library and was getting married. This summer he called in again just to say hello. Work at the brewery no longer took much of his time, but the library had asked him to do more time again. I asked if he wasn't falling into the trap of being asked to do more than he wanted. He said that he had thought over that very thing, because that was something he had learnt at Workwise. He said he realised that he actually wanted the management job coming up soon and they wanted him to apply for it, but he would need to be working full time. BM said that that was why he was going to try full time first and make sure he was happy, but he did think he would like to apply for the manager's post. I wished him luck and pointed out how well he has done.

Trainee SL

SL has long and enduring mental health problems and when he first started at Workwise he couldn't sit down with other people, or face them. At breaks he needed to stand facing the wall on his own. Gradually his condition improved and his confidence grew. Communications took some time, but as he was very bright he really thrived on learning new skills and Workwise were able to engage with him through training. It turned out that he was an excellent designer and he now has a number of patents to his name. Recently he has been really helpful volunteering to teach new Workwise trainees CNC techniques. He has gained a qualification to teaching adults in further education and now teaches Workwise trainees.

Trainee DS

DS was so nervous and uncertain when she first started at Workwise, the desk used to shake from her trembling! She constantly told staff she wasn't good enough to do - well, anything, but eventually she surprised herself achieving IT qualifications and then a level 1 NVQ. It was only level 1 because she refused to accept she was capable of anything higher. Somewhere near the time of completion of this NVQ she began to realise she was a little better than she thought and might do a level 2. Before the completion of level 2 she was working in the sales office as a very efficient administrator. When Workwise needed to employ someone, DS applied and got the job. Six months later she left Workwise for an administrator's post on an air base. 5 years later she is still there, married and promoted; now a very confident and charming lady.

These stories are so much better than any statistic. This movement into sustainable employment is significant but, how the recession may affect job availability in the coming year was also considered and a method of tracking those who have left, rather than relying on them getting in touch, as this would reflect a more accurate result.

68% of Workwise day-place trainees wanted working structure in their lives with experience, skills and communication of a workplace, but did not yet feel ready for that step into the workplace. The opportunity of moving these people into a working environment with which they can cope was therefore used as an indicator.

For those that become a member of the workforce of their social enterprise, they are gaining an actual working structure, fulfilment and responsibility in a real working environment doing a real job. From the one-off survey it was clear that although that has always been the intention (and mission statement) of Workwise, the opening of their shop, Cavern4 has added a tangible difference for the trainees who are now proud of working in the production teams. For a small number of trainees who pass through Workwise, their chosen path involves CAD and working on design of products. Workwise have been lucky enough to receive a regular flow of very talented and artistic people who will produce unique designs for products without which the appeal to customers would certainly not be so great, but for them it is a wonderful opportunity to be able to have an idea adopted and to be able to see it through production.

For a number of trainees with long and enduring mental ill health, it can often be a long slow journey and so indicators were used that looked at distance travelled with and if Workwise were fulfilling their trainees expectations by giving them and their referrers a positive result.

Workwise therefore asked how they performed as an option of care for referral agencies to use for trainees on a mental health Care Plan Approach (CPA) compared to financial indicators that compared the cost of other type of day care for those with mental ill health⁹, looking at both statutory care and voluntary organisations. Thus, Workwise were looking at how they were maintaining progression for that individual with measurement of progression, moving towards job readiness.

⁹ Unit cost of Health and Social Care 2008 which looked at 23 hostels from 8 MH services

Another, more appropriate, indicator for some outreach clients was to compare referral to Workwise with referral to a job agency. Some trainees surveyed had tried or investigated other job agencies but mostly found themselves ill prepared to cope and not receiving the support they required, so had decided they couldn't work (although that was what they wanted to do ultimately).

Outcome Description	Indicator	Financial Proxy	Value £
How would we describe the change?	How would we measure it?	What proxy did we use to value the change?	What is the value of the change?
Trainees are engaged in purposeful activity that they consider 'worthwhile'	Trainees in work in placements in social enterprise for those who would not otherwise have had access a reemployment support partnership responsible job at this time.	Average part time Working wage	£7,333.00
	Trainees reporting that they were engaged in worthwhile activity and had structure in their lives and less anxiety, isolation, depression		
	Family and friends reporting improvement in mental-well being of these trainees		
Trainees access service by hospital transport (for those to whom public transport is either too difficult or inappropriate to their mental state at that time)	Journeys facilitated a year	Taxi fare at £1.55 per mile with average journey of 15 miles (£23.25)	£23.25
Trainees access service by public transport, or own transport, and so increase their independence.	Journeys by public/own transport a year	Average cost of £3 a week per person supplement to travel expenses	£3.00
	Trainees reporting becoming more independent		
Trainees confidence and motivation increased	trainees with expectations met or exceeded	Voluntary/non-profit organisations day care for people with mental health problems @ £43 a day for average twice weekly	£4,300.00
Trainees develop design skills and potential	Products designed by trainees	Design costs for products £300 per product for 10 products	£3,000.00
Trainees mental well-being, self-esteem and motivation increased by having their products and art accepted for sale.	Reduction of involvement by community mental health team as trainees' mental well-being improves	Per hour of client contact costs mental health professional £55 @ average of 20 hours/year	£1,100.00
Trainees find environment and support networks too structured and feel that they no longer have control over their lives	Trainees reporting that everyone else makes decisions for them	cost of PA via temp agency, 3 hrs a wk for a yr, to manage calls and diary to retain control of decisions	-£1,560.00
Trainees receive opportunity to learn, towards more job reemployment support partnership responsibilities and for future	No of individuals returning to LLL qualifications achieved see below) (For	average cost creative writing evening class for a year	£80.00

Outcome Description	Indicator	Financial Proxy	Value £
How would we describe the change?	How would we measure it?	What proxy did we use to value the change?	What is the value of the change?
mainstream employment			
Trainees become work ready	trainees becoming work ready	Sessional cost of a government employment training course (15 x £21)	£315.00
Trainees gain employment	Trainees gaining employment	Gaining employment and coming off IB £89.80 pw	£4,669.60
Trainees develop dependence on Workwise and support networks and find it harder to move on	Trainees that don't gain employment who are otherwise ready	Not gaining employment and coming off IB £89.80 pw	-£4,669.60
Trainees independence and work readiness increased	trainees progressing towards work/volunteering/self employed/life goal	Sessional cost of a government employment training course (10 x £21)	£210.00
Trainees deal positively with work related mental ill health issues	Clients contacting the employment advisor over a job related problem Number gaining employment and coming off IB	Gaining employment and coming off IB £89.80 pw	£4,669.60
Trainees begin learning toward qualification while also using those skills and working in a supportive, but real business environment	Worklink clients joining training qualification	Average course with work experience day placement @£35 and qualification @ average cost of £65 per course in the year	£2,950.00
Trainees mental well-being improved (improved confidence, self-worth, self-reliance and a new pride and motivation in their achievements)	<i>identified above</i>		
employers mindful of mental health issues	employers taking up consultancy and/or gaining awards for being mindful of mental health issues	notional consultancy fees for 2 days	£600.00
West Suffolk College's meet requirement for inclusion of a disability group	Number - Retention of enrolments with mental ill health	Average course cost of training costs =£689-achievement of approx £107 with a third taking 2 courses	£883.00
West Suffolk College keep their numbers of special disability delivery up by support of Workwise as a Partner Provider.	Number - Achievement by those taking qualification	Additional achievement payment	£107.00
Income for social enterprise from supply of materials that increases profit margin of products	More profit gained from goods made with these materials	market value of goods	£1,500.00

Outcome Description	Indicator	Financial Proxy	Value £
How would we describe the change?	How would we measure it?	What proxy did we use to value the change?	What is the value of the change?
Referral agent's client lists are reduced as trainees become less reliant on Community Mental Health services	Reduction of involvement with their Community Mental Health Team	Per hour of client contact costs mental health professional £55 @ average of 30 hours/year	£1,650.00
Artists acknowledging the standard of products produced by trainees is comparable to theirs	Artists support Workwise by offering their products for prize draw	Market value of goods donated estimated at around £1200 - average £46.50	£46.50
Allowance for rent of building on NHS site for Workwise as a independent provider of services for mental health as rated by the Trust	Allowance for annual rent	Value of rental of portable building	£8,000.00

2.6. Duration of change

The longevity, or sustainability, of each change was also considered. In many cases the change was 'life changing' for the trainee and potentially lasted for the rest of their life. However, it is hard to keep track of trainees who have gone into work and Workwise do not have this data currently.

However, anecdotally, if trainees survive the first six months, they are usually (98% of those seen again) still in employment and moving on with their life next time they are in contact with Workwise and/or staff. It is getting past the first six months that is most important milestone and Workwise tend to only have contact with those that don't cope or find the job doesn't suit.

This also points to the fact that the sustainability of this change is likely to be down to others (the abilities of the trainee themselves, their employers, their support networks etc) by virtue of the fact that they are no longer engaged with Workwise.

So there is potentially long term change as a result of Workwise activity, but it is difficult to be confident about the duration or attribute all this change to Workwise. To take this into account the analysis has capped any change at a maximum of 5 years. But in many cases, eg for employment outcomes, limited it further to 3 years after Workwise activities and also identified significant amounts of drop off (see section 3.2) to avoid over estimating workwise's contribution to this change once trainees have left Workwise.

2.7. Financial proxies and sources

Financial proxies have been selected that represent the value to the stakeholder as much as possible. In some cases this has been easier than others. Where it has not been able to identify a value that represents the change in costs/income to the stakeholder, then other values have been considered which include changes in costs/income for other stakeholders or the state. But this has been avoided where possible.

Financial proxies that were found in other SROI reports for reduced NHS costs as the value of increased well being of trainees were considered less appropriate and were not used. In many cases medication is an important factor in recovery and without that most mental ill-health sufferers would not be able to function. However unlike an infection you can treat and it goes away, many may take medication long term as, say a diabetic on insulin. To both, medications may be equally as vital to the control of their illness and their opportunity to get on with their life. To suggest the removal of that medication might be a social benefit is not appropriate in Workwise's opinion and often such a suggestion is counterproductive to the recovery of those with mental health problems.

Each financial proxy and its source are detailed on the impact map.

For trainees, an average part-time wage was considered as a financial proxy for a 'worthwhile job' that would barely off set the jobs they do, however as most are on benefits, they can only be receiving expenses up to £20 a week.

3. Impact

3.1. Deadweight, attribution and displacement

Each change, for each stakeholder, has been considered for deadweight, attribution and displacement. Respectively:

- Would the change have happened anyway?
- Is any of the change down to others?
- Has this activity just moved something rather than changing it?

Were the answer was 'yes' to any of the above, then the percentage of change was estimated that would have happened anyway, was down to others, or was just moved.

These percentages are detailed on the impact map.

In considering deadweight, it was felt that in most cases the trainee would have done absolutely nothing without some intervention and some occupation. There is little else available that can meet all the requirements of trainees. In most cases, if Workwise had not been an option it has been estimated that there would have been approximately 5% who would have achieved their goals anyway.

Attribution was difficult to judge as it involves the Community Mental Health Teams in the cases of all trainees on CPA. In these cases Workwise is only one cog in the care plan wheel and the importance of that cog will vary from individual to individual. Some will be receiving important in-put from their care workers and other mental health professionals, while others are considered ready to be "cast off" when they start a placement at Workwise. Referrers need to feel that the individual's recovery would be best served by a work placement at Workwise and Workwise need to continue to be able to demonstrate this, not just to the referrer, but to the individual as well. All will look for a clear progression route. The requirement of the referrer's reduction of care was therefore considered as an indicator and in that way the attribution is reduced to simply facilitating the referral rather than a Workwise role within the full treatment. However, it was judged such attribution would still vary from individual to individual and is therefore arbitrary and an estimate.

3.2. Drop off

Where a change has been judged to last beyond Workwise's activities (see duration above), the amount in future years is likely to be influenced by other factors. Drop off is used to take account of this and the percentage not down to Workwise in each future year estimated. These percentages are detailed on the impact map.

3.3. Calculation of impact

The impact, the total value of each change, is calculated as

the financial proxy
multiplied by the quantity of the outcome
minus any deadweight, attribution and/or displacement

This calculation has been carried out for each row of the impact map. The total impact is then the total of the all the impact calculations for each outcome.

The total impact (at the end of the period of analysis) of activities identified by this analysis was valued at **£906,861** using this calculation and is shown on the impact map.

4. Social return calculation

The following calculations and steps have been used to arrive at the Social Return of the activities considered in this analysis. The calculations are only summarised below, for full details of these calculations please refer to the Cabinet Office sponsored Guide to SROI (Stage 5).

4.1. The future value of change

Some of the change identified last beyond the activities analysed and the period of analysis as discussed earlier in sections on duration and drop off. Where this occurred, the value of the change in future years has been projected and the value over all projected years totalled.

In projecting value in to the future, the fact that in the future, the monetary value used may be worth less must be taken into account. To do this, the present value has been calculated using a discount rate of 3.5% (the basic rate recommended for the public sector in HM Treasury's Green Book).

The present value of activities identified by this analysis was valued at **£1,494,484** using this calculation and is shown on the impact map.

4.2. Social Return

The social return is expressed as a ratio of present value divided by value of inputs. For this analysis, the social return ratio is therefore:

$$\frac{£1,516,928}{£490,456} = 3.09 : 1$$

This is the normal way of presenting social return and the overall figure produced by this analysis. **This means that this analysis estimates that for every pound invested in Workwise activities there is £3.09 of social value created.**

However, if you invest money, in a savings account for example, you would normally deduct the initial investment from the final figure in your account to consider the return on your money. This is the net return. So, if the initial investment (the total inputs) is deducted from the present value to give the net present value and then divide that by the value of the inputs, the net social return for this analysis will result as follows:

$$\frac{(\text{£1,516,928} - \text{£490,456})}{\text{£490,456}} = 2.09 : 1$$

4.3. Sensitivity analysis

Given that this analysis contains estimations and assumptions, it is prudent to review where these decisions have had a significant effect in the overall SROI figure stated and to, therefore, consider the confidence that can be placed on this.

As this is a forecast analysis, it contains more estimations and assumptions than an evaluative analysis would.

The 2 most significant (or sensitive) areas of the analysis relate to the changes for trainees:

- Trainees' are engaged in purposeful activity that they consider 'worthwhile'
- Trainees' confidence and motivation increased

Together, these 2 outcomes account for 66% of the total value calculated. They are also, incidentally, very material. These two rows of the impact map are reviewed here to consider the estimations and assumptions made in arriving at the value of these changes.

Overall, applying some alternative scenarios to this analysis the greatest change to the SROI ratio is a reduction of 19% from 3.09:1 to 2.47:1. So, even with these significant variations below, there is still substantial value created by the activities analysed.

Other factors that should increase confidence in the value calculated by this analysis are that:

- The duration of changes that are 'life changes' is limited to 3 or 5 years in this analysis. If this value were projected further in to the future, the value presented would increase.
- The financial proxy used to value independence, only takes into account travel-to-work impence and would be higher if it was including all effects of independence.

Trainees are engaged in purposeful activity that they consider 'worthwhile'

- Quantity of the outcome – 54 out of 105 trainees in work in placements in social enterprise for those who would not otherwise have had access a reemployment support partnership responsible job at this time.

There should be high degree of confidence in this figure as this indicator has been derived from actual data for the current year and it is supported by 2 other indicators that show that:

- 100% of trainees surveyed reported that they were engaged in worthwhile activity and had structure in their lives and less anxiety, isolation, depression
- 100% of family and friends reported improvement in mental-well being of these trainees

So, using the objective indicator of those in a placement, Workwise have only counted approximately half of the trainees as the quantity of this change, when in fact there is evidence to suggest that all trainees achieved this change.

- Financial proxy – average part time wage

The proxy used here is appropriate to both the nature of the change – engaged in placement activity towards full employment – and also to the value to the trainee themselves. The

expression of 'worthwhile' comes from their responses and purpose in engaging in these activities - to get out of the house to do a "job" that they consider worthwhile, not just "occupying them". So this proxy attempts to encapsulate these concepts of value of a "worthwhile job" as expressed by the stakeholder. However, the proxy has not been checked with the trainees. Partly as this was a forecast analysis and partly as time and resources did not allow. So it is possible that trainees may view this value as too high.

- Estimates of deadweight, attribution and drop-off

Deadweight, displacement, attribution and drop-off are all estimates in this analysis. They are partly based on stakeholder views, but they have not been checked (particularly deadweight) with any control groups or objective data. There is, therefore, a risk that these are too low. But again, as a forecast, objective data is harder to find.

Drop-off is relatively high as there is little evidence (to date, for a big enough sample group) that this change is sustainable beyond a year or two after Workwise intervention.

- Conclusion

Overall, the possible variations in these estimations and assumptions appear to balance each other out if we consider the options of each of them that could be changed as above. As shown below, any possible over valuation of the change is compensated for by the low quantity of outcomes used. The value for this area of the analysis should be considered a reasonable estimate of the value to the stakeholder of this change.

Element	Current calculation	Possible variations	
Change	Trainees are engaged in purposeful activity that they consider 'worthwhile'		
Quantity	54	105	Evidence that they all achieved change
Financial proxy	£7,333.00	£4,840.00	Value of change reduced by 33%
Deadweight	5%	20%	More deadweight
Attribution	10%	20%	More attribution
Drop off	50%	50%	Drop off is high anyway
Impact	£331,793.32	£318,743.00	
Effect on SROI ratio	3.09	3.05	-1%

Trainees' confidence and motivation increased

- Quantity of the outcome – 70 out of 105 trainees had their expectations met or exceeded

This figure is based on actual data from the previous year and so is a reliable estimate. It is potentially subjective, but influences of the staff in gathering this data have been removed as data was gathered by trainees interviewing each other and providing Workwise with anonymous data. So, for a forecast, it is an appropriate way of estimating the number of trainees that will achieve this change.

- Financial proxy – day care costs

For a number of trainees with long and enduring mental ill health, it can often be a long slow journey and so a proxy has been used that looks at distance travelled and if Workwise were fulfilling trainees expectations by giving them and their referrers a positive result.

Workwise therefore asked how they preformed as an option of care for referral agencies to use for trainees on a mental health Care Plan Approach (CPA) compared to the cost of other types of day care for those with mental ill health¹⁰, looking at both statutory care and voluntary organisations.

This is one of the areas where it was difficult as a forecast to ascertain the value to the stakeholder and so the potential change in costs to another stakeholder has been used here. When actual data is used, the trainees may value this change higher or lower than this estimation. This value is therefore, potentially uncertain at this stage.

- Estimates of deadweight, attribution and drop-off

Deadweight, displacement, attribution and drop-off are all estimates in this analysis. They are partly based on stakeholder views, but they have not been checked (particularly deadweight) with any control groups or objective data. There is, therefore, a risk that these are too low. But again, as a forecast, objective data is harder to find.

Drop-off is relatively high as there is little evidence (to date, for a big enough sample group) that this change is sustainable beyond a year or two after Workwise intervention.

- Conclusion

As shown below, possible over quantification and valuation of the change would result in the impact being more than halved and the overall SROI dropping by 18%. The value for this area of the analysis could be a potentially high estimate of the value to the stakeholder of this change.

Element	Current calculation	Possible variations	
Change	Trainees' confidence and motivation increased		
Quantity	70	60	Actual data could vary from previous year
Financial proxy	£4,300.00	£2,867.00	Value of change reduced by 33%
Deadweight	0%	20%	More deadweight
Attribution	7%	20%	More attribution
Drop off	50%	50%	Drop off is high anyway
Impact	£279,930.00	£110,093.00	
Effect on SROI ratio	3.09	2.52	-18%

¹⁰ Unit cost of Health and Social Care 2008 which looked at 23 hostels from 8 MH services

Discussion and Recommendations

The aim for Workwise with this forecast has been to have a base plan for the first year of changes to the funding. From this, Workwise hope to be able to see where successes have been and where to improve to sustain a good level of social return.

It is hoped that this report and impact map, though only a forecast for the coming year April 2009 to March 2010, will give stakeholders an idea of the social value of referral to Workwise; an explanation as to what trainees feel they gain in using Workwise; how Workwise's social enterprises work and the value of them to trainee recovery.

Recommendations

1. Workwise should explore further in future stakeholder engagement unintended and negative changes. These are difficult to forecast and so only estimations have been made in this report. Specifically, indicators and values from the stakeholders perspective should be explored to confirm (or otherwise) the estimations used in this forecast. Subjective indicators used in this forecast will also need supporting with objective indicators in developing this analysis in the future.
2. Were estimates have been used, actual data and indicators and values from the stakeholder's perspective should be explored to confirm (or otherwise) the estimations used in this forecast. (for example - Trainees confidence and motivation increased). They should explore "what changed for you?" and "what would you show me if we were looking for evidence of that change?" and then "what's that worth to you?".
3. Workwise might consider some further support or training before re-doing their SROI if they think they could benefit from that. (They should be encouraged, though, that an excellent start has been made here!).
4. Deadweight and attribution estimations need to be supported with benchmarks where possible and trends considered. Longitudinal data in a number of areas would also add credibility if this can start to be gathered.
5. Workwise should check the SROI and values (proxies) used with stakeholders to test them.

Workwise response to draft report

The SROI has been a steep learning curve for us, but has been a very valuable one. From this exercise we have learnt a number of things that, when we when we next do a SROI will be put into action and some that we are already implementing. More importantly it has helped us to look at ourselves more critically.

1. *Although we have always sort feedback and surveyed stakeholders, we have not always asked the right questions. Doing the SROI has helped us to look critically at what we really need answers to and how the response to the question can actually be useful in informing us. In future we will take much more care in how we put questions and who we ask so that the responses have a better chance of offering quantifiable opinions.*

Many of these questions can be included into routine reviews and follow-ups, making collection of information easier

- 2. The SROI has brought to our attention the positive impact of running Cavern 4 and providing our trainees with the opportunity to have products they have produced sold alongside that of other local artists, (described self-deprecatingly by one trainee as "real" artists). This simple acceptance by the general public was shown to have a surprisingly high reward in improving the feelings of "self-worth" (their word) amongst many of the trainees. We had been looking at monetary profit previously but have found it also has soft outcomes and has already changed how we market the shop.*
- 3. It has also shown that where the result of selling to the public had a positive effect, the provision of a token expense payments (which had to be under £20 per week to preserve the recipient's benefits) was having a negative effect in that a number didn't wish to move on into a difficult job market but appeared to becoming too comfortable and possibly institutionalised. Our aim in taking this data was that in the following year we were undergoing changes in funding systems and we were therefore looking at the impact these might make and changes we could implement to maintain and improve social impact. As a direct result of this we have from August withdrawn this payment and so far the results seem very positive.*
- 4. Researching financial proxies and the sources for these have helped us to look more closely at material written on mental health and at other organisations in the sector. Thus we have critically compared what Workwise can provide well and what we are not quite so good at doing. Being rather a complex organisation Workwise has perhaps ignored the fact we could improve some aspects of service if the whole is progressing well. Now looking at the impact map, we not only have a basis to build our next strategic plan with, but also quantifiable information as to the value for money in each aspect of the service.*
- 5. However, from this research we have found that we do use a suitable method to measure soft outcomes but again we can see how more pertinent questions could perhaps offer even more in sight in the next year. Also we will be looking at ways to keep this record available such as an interactive programme so as to avoid the continual input from forms which due to confidentiality cannot be given to just anyone to up-load.*

Annex A

Supplementary information from Workwise

Workwise Quality Statement

Workwise will work to uphold its mission statement and constitution and demonstrate its commitment to quality to all of its stakeholders through continuous monitoring and evaluation of all the services that Workwise provides the community.

Workwise Capacity

Workwise have, at this time, 14 staffs of which 4 are qualified instructors who are providing 24 training courses in this academic year with expected 75 enrolments. The qualifications offered and number of enrolments used represent a good average over the past few years but may well change from September 2009 to reflect funding changes in adult training provision.

It should also be noted however that trainees on training courses at Workwise work in small groups, usually 4 or less and that each learner is allowed time to work at their own pace as far as possible. Unlike other training providers, the learner is on work placement at Workwise and is allowed time out to complete qualifications. They do not automatically leave when completing the qualification but get the opportunity to continue in the placement to gain confidence by putting their new skills into practice with increased responsibility or live projects, i.e. customer orders.

Workwise consists of 4 premises within Bury St Edmunds:-

- Workwise provide a working Administration training office, ITC training, Worklink job search, career matching and trainee support and general accounts and management offices at Hospital Road.
- At Chamberlayne Road there is a CNC cutting, engraving and sign making service social enterprise at no.18.
- At no.17 Chamberlayne Road there is a sales office, a Furniture-making department social enterprise, Corporate Embroidery social enterprise (Stitch), T-shirts with heat transfer designs, a Glass Engraving department incorporating lamps and sundials, Corporate ID department and a "Textiles" department with additional quilting service. There is also a CAD design suite allowing for staff and trainees from the other departments to design and develop new products and to be made products to order and customer requirements. Trainees on placement may work in any of these areas on various stages of production but will be encourage to use their talents to best advantage and learn new skills as they work towards their personal goal.
- In addition Workwise runs a retail outlet, Cavern 4, in Whiting Street in central Bury St Edmunds, which provides Workwise trainees a showcase for their produces, which sell alongside local artists' works. Trainees working towards customer service qualifications are

encouraged to work in Cavern 4. There is also a gallery, which helps to bring in customers and provides ever-changing exhibitions.

Scope of analysis

Initially Workwise was asked to undertake training in the methodology and development of an Impact Map and SROI Report. This training and support was being offered by SIEF as a basis for a future training course that could be offered to organisations that may be required to produce social return on investment forecasts for their projects in future.

Workwise considered the work and staff time involved against the benefits to the organisation of creating our own SROI Report. It was decided that it was a very worthwhile opportunity. Once embarked on the project, it became obvious that Workwise would be able to use this work, not only to find out what social impact Workwise could show our organisation provides, but also to better understand implications of this effect for our future planning and development.

Strategic Context –purpose of analysis

As an organisation, Workwise have faced major developments during the past year (2007-8) regarding funding coming into place on 1st April 2009. These changes have meant Suffolk Social Services introducing a tendering process for money paid to organisations from their Mental Health Pooled Fund rather than the previous set service level agreement. Workwise tendered, as part of a partnership of organisations including Shaw Trust, Family Action and Street Forge Workshops and successfully gained a contract to deliver the employment provision to 5 of the 7 districts in Suffolk as Employment Support Partnership (ESP).

This covers our outreach work only. For our work-experience placements, the government has introduced a system of individual personal budgets for adults with mental ill health, as they had previously introduced for other disabilities and for the aged. This has meant that as from 1st April 2009 our existing and new trainees would need to have their work-placements paid for by either spot purchasing the service from that client's budget within the Community Mental Health Team's Social Service budget or by the individual applying for a personal Direct Payment for their use on services of their choosing. In this latter situation, Workwise needed to be able to market its advantages not just to the referrers but also to the clients themselves.

Adult training is also undergoing change with the Learning and Skills Council ceasing to exist in April 2010. In March 2009 there is planned a new mental health strategy aimed at supporting learners with mental health issues, which will look at education and employment opportunities. It is expected that when the LSC ceases, the split will be to a Young Persons Funding Agency and Skills Funding Agency for 19+. At Workwise 99% of trainees fall into the latter group, however it is envisaged that community mental health adult education will fall into the former, Young Persons' Agency. There will also be a change in the courses being funded with many of the adult training courses on which Workwise previously developed and relied being replaced by new qualifications. This, as well as new requirements of our client group, will impact on how Workwise deliver training and skills in the future.

With most of these changes to our funding coming into effect in the coming year, it seemed a good time to lay out the forecast for the organisation. By putting out a good average of

provision and capacity, it is hoped that in summarising our social impact on mental health, Workwise will be able to obtain useful recommendations and direction for future development.

Therefore a forecast for the coming year would give us a starting point to consider any impact the changes will have on Workwise and our client group. The project was thus decided to cover a **Forecast for Workwise for the Year April 2009 to March 2010**

The Methodology–actions to complete forecast

For this study we took 4 main objectives in investigating possible indications for social value: -

- To identify possible health indicators which provide social impact for adults with mental health problems.
- To identify methods and barriers to the measurement of soft outcomes and individual perception of well-being for sufferers of mental health issues.
- Consider access to work/volunteering /training/work placement for adults suffering mental ill health including prejudice.
- Make recommendations to inform the further development of training method for organisations to consider social return on investment

The methodology involved the following stages: -

(1) Stakeholder analysis (table 1 and Impact map) and their involvement in Workwise with examples of the trainee journey. (2) Mental Health and the measurement of well being. (3) Information collection and search for suitable indicators (4) Financial indicators that we could use without assuming too much. (5) Deciding on deadweight and attribution involvement. (6) Collating findings

How we gathered information, looked at other organisations and searched for suitable indicators and measurement tools are described in these stages over the following pages. As this is a forecast, we have assumed numbers based on previous years and balanced it with the effect that we expect the external changes to have on Workwise.

Stakeholder Analysis

Trainees are Workwise's main stakeholders for whom the organisation exists. It was felt right to divide them into those who attend Workwise for work-experience and training on day-placements (see *Trainees on Day placements*) and those who are mainly seen on outreach as a part of our employment advisory services, (see *Clients using outreach services*). This is basically because they use the service differently, but in the end their outcomes are similar, but on a different timescale.

It should be noted that mainly, but not exclusively, the first group are on the Care Plan Approach (CPA) and hold a care plan with their community mental health team. The second group in the outreach situations are usually more job ready requiring support in job search, CV and career matching. They are less likely to be on a care plan and often self refer or come from the Job Centre Plus. With this group they will only take up a day-placement and/or training qualification should that

need be identified during an Information Advice and Guidance (IAG) session as a suitable progression route for them.

Family and Friends of adults suffering from mental ill health are often badly affected by the onset of loved ones developing a mental health problem. For this reason we felt that they were a serious stakeholder in the recovery of the trainee. Workwise therefore surveyed a good cross section to see if they felt that placement at Workwise was beneficial to the trainee and if they had noticed any difference in mental well-being.

The Big Lottery has been an important funder for Workwise and especially for the set up of our shop, Cavern 4 in Whiting Street, Bury St Edmunds. Although it hasn't as yet been used as a training facility to the extent we envisaged, it appears to have provided trainees with many other positive outcomes, which came across in recent surveys.

Grant Making Trusts (Rank Foundation £15,000; Henry Smith Charity £16,782; Lloyds TSB Foundation £21,000) provide salaries and capital social firm development to enable Workwise the opportunity to provide the service and to keep the social firms up-to-date with equipment and facilities so that a modern work environment is maintained that will benefit the trainee if moving on into main-stream employment.

Statutory Bodies (SMHP NHS Trust, Primary Care Trust, Social Services Suffolk, Social Services Norfolk) It is in their interest that adults with mental health issues have support towards recovery and ultimately the opportunity to contribute to their community by living a useful and responsible life. While the adults with mental health problems, commissioners and referrers feel that Workwise is a useful tool to have available in this journey, they will be prepared to see that we can be funded to provide that tool.

Referral Agents (Community Mental Health Teams; Job Centre Plus, GPs, Link workers, other agency Partnerships, social services and hospital mental health wards) are vital to Workwise in encouraging and facilitating use of our service. Our information, advertising and networking are necessary to keep them informed as to what advantages there are to mental ill-health sufferers in using our services. It is through their in-put that we receive referrals to the service. The ESP Partnership has a special input in that Workwise and its partners were able to obtain through tendering this funding and therefore this service and our own in-put and the co-operation of all members of the partnership is very important to its success.

Board of Directors and Volunteers have been put together as one but include (1) all our Directors who work for Workwise in a voluntary capacity and (2) other departmental volunteers. The Directors are either still working or retired, but with skills vital to the running of an organisation and wish to give something to the community by offering their time and expertise to Workwise. Other areas where there are volunteers are the shop and assisting staff members in departments by offering their time, skills and experience. In this group some are nearing or over retirement age and having had some involvement with Workwise that made them wish to come back and offer some of their time. Others are on the job market, but have a lot to offer the organisation and although no longer requiring care and support, they wish to keep their job skills up by offering their services.

Workwise staff gives much of themselves to the organisation but gain the outcome of job satisfaction in the successful progression of trainees. The longevity of staff and good staff development bear this out. Also Workwise holds the internal Matrix quality standard of IAG and is a member of Mindful Employer.

SEIF have provided much support in social enterprise development as well as money for up-to-date equipment to facilitate new work and production within the social enterprise. They have also funded our training for this project and awarded revenue funding to employment consultants to develop the social enterprise.

Business Link has also given the organisation good support and financial help in various ventures.

Educational Bodies (West Suffolk College, Learning & Skills Council, Open College Network) Workwise is a partner provider with the West Suffolk College for delivery of adult training and as such draws down training provision money for us for the courses we deliver which provides us with status, QA support and some assisted staff training opportunities in return for assistance in their quota of delivery to minority disabilities provision. OCN have helped Workwise to break ground in the development of training courses which involved new production techniques for which there had been no suitable training package for our learners and in the next year will be supporting us in moving these courses forward for national use.

Suppliers/donators have been included because we have had the good fortune to find suppliers who can provide us with free materials that they would otherwise be disposing of in landfill sites. Thus the input to us is "green" and valuable for keeping production costs low. For them, they gain the output of naming us as a part of their company's social-responsibility contributions and improve their own environmental record.

Public, local community and Customers (Cavern4, website sales, direct sales and commissions to the workshop) are important stakeholders in social enterprise and the sale of our products. Workwise are beginning to build a loyal customer base and have tried through the years to build up our profile in the community through various projects. This support is important to us.

Artists initially provided the shop, Cavern4, with exhibitions for the gallery, but also they augmented our products to add variety and also to take pressure of the social enterprises. This has had the hidden value in outcome by providing our trainees with a yardstick by which the value of their products can be considered against production of "artists' works". That their products should be sold on an equal basis has given rise to a definite boost in self worth for trainees.

Employers in the local community have been involved with Workwise through offering job opportunities and being involved in Workwise awards (promoting well-being in the work-place). In the coming year, with unemployment figures rising and job opportunities disappearing, we propose to also provide for a consultancy fee support of those employers who feel they have staff at risk or suffering from mental ill-health and need non-threatening help to ease the situation without job loss and re-employment costs. This may well involve more employers as stakeholders during the forecast period, but until now their in-put has only been with job offers.

Transport –Suffolk Mental Health Partnership Trust provide our administration building and also use of their transport system to help with access for those of our client group who might otherwise not be able to take up a work placement with Workwise because of either living in a rural area without suitable public transport or because of their mental health condition they find public transport overwhelming and a step too far in their present recovery.

Theory of change

With the outreach trainees we did not expect to see a great change in the coming year, although we would be working within the consortium, Employment Support Partnership with Shaw Trust, Family

Action and Street Forge Workshops. It was felt that we would be able to support each other and in spite of expected problems within the job market, clients would still get the help they required.

It was also hoped that some training could be taken “outreach” and that this would benefit those in rural areas, give them a chance to improve skills and help them to move forward towards work in future.

Change in funding for the work placement trainees and in the training courses that they will be looked at in the coming year and is the most likely to affect how Workwise operates. Workwise have already worked hard to make the change over to direct payments as simple as possible for our trainees and received a very positive response so far. Our Worklink staff have given presentations to referrers to explain what is on offer at Workwise but also have attended presentations on how new systems will work.

Existing training courses are being put forward for approval nationally so that we can continue to offer training in the interesting skills undertaken in our workshops, but with embedded core units to complete national diplomas at level 2 to take out into the workplace.

Data sources

Amongst the surveys carried out we looked at existing trainees, but as the new systems for payment was about to start, we were also able to gauge how much they wanted to remain at Workwise to complete their personal goals.

The answer to that was that all did. Workwise also had 2 trainees amongst the surveys who referred to leaving other organisations and feeling they were achieving so much more with us. There were another 3 who said that should they be denied a place at Workwise they would have to try other organisations but from previous experience knew that they didn't offer real work or the job satisfaction that they had gained through social enterprise at Workwise.

There was a clear value of having Cavern4, our shop, with most noting how it improved their self-esteem and confidence to know that they were producing goods that were of a quality suitable for sale and that customers actually bought their work. One remarked that since the shop opened they felt the quality of work had improved at Workwise because they knew it was real.

This is always hard to be certain without the ability to follow-up after trainees once they leave us, how recovery will be sustained. Mental health relapses are possible and often we will recommend that the trainee use the benefit umbrella scheme until they are settled in their new work. Workwise did take into account returning trainees who have been with us in the past. This was under 3% and although we were only covering those returning to the same route. Of those re-referred the difference in time since we last saw each of them varies so greatly, it was not reasonable to give any duration for this drop-off. However we still feel that eventually improvement will be seen.

For those returning to open employment, we could track down some, but others happily disappear. Many return to visit us periodically so we can see how well they are getting on. Of people employed in the last year, we found it would have been very difficult to track a representative number in the time to survey. However it was reported by David Winspear¹¹ that lower levels of depression/anxiety and higher levels of reported self-esteem and attitudes to work motivation came when a vocational outcome (employment, training or work preparation) could be followed.

¹¹ “Mental Health and employment outcomes for Incapacity Benefit customers” –abstract from article by David Winspear in Journal of Psychology Vol 10, 2009

Annex B

Stakeholder questionnaires

(No names please this is to be totally anonymous and confidential)

Background Information sheet for John and All Staff at Chamberlayne Road

Back in July 2008 and again on 27 February 2009, during our staff training on the Social Return On Investment (SROI), we asked some of our trainees questions about their experiences at Workwise to help to evaluate our service.

However to now complete our Impact map for SROI, we really need to ask a few more questions from a wider range of stake holders for a more comprehensive survey covering quantifiable issues.

With this in mind I attach a number of question sheets (this is also being emailed to Hazel so that she has the form, if you require more). See instructions below:

1. **The trainee questions** - these are not for staff to ask - but please will you facilitate their completion by making sure trainees get time to go and sit down and fill them in. Please find someone amongst your trainees that doesn't mind writing and ask them to ask fellow trainees for responses, or the trainees can fill in their own if they prefer (not everyone is happy filling in forms). Remind them that it is confidential and no names should be put on forms.
2. **Family/friends/house-mates** – Again this is not compulsory, just for any trainee who would like to take one home to get filled in for us, Often it is those at home who feel they have been as much effected by the problems associated with mental ill-health as the suffer. So we feel they are a stakeholder in recovery and their opinion matters.
3. **Customers** – If you are dealing with a customer, there is an opportunity to get feedback here also.

I don't mind how you do this, but it must be done during the week of 16th to 20th March, so we can complete our SROI map on time.

Will staff at Chamberlayne Road either hand forms to Hazel (who will be co-ordinating at your end)

or

put in post for Mandy or Melanie at the Hospital Road office.

Trainees to answer questions honestly without in-put from staff

- Before you were involved with Workwise, what were the things you wanted to change in your life that made coming to Workwise part of your plan? **(How were you feeling then?)**

- What did you think you'd get from Workwise? **(Had you any particular expectations as to what you'd gain by coming to Workwise?)**

- What has changed since you started working at Workwise? **(Have your expectations been met so far? If you feel there have not been changes or your expectations haven't been met at all, have you any suggestions of what you'd like to see happen?)**

- Do you use Hospital Transport to come to Workwise? YES or NO If Yes, would you have been able to come to Workwise if transport hadn't been available? **(Would you still have tried? Would it have been possible/difficult or involved other people bringing you?)**

- How do you feel about doing a responsible job at Workwise, being involved with production of quality products? **(Is it important to you that your products are sold to the public? Do you show others what Workwise/Cavern4/market/website has to offer?)**

- What might have happened for you if you had not been able to come to Workwise?

FRIENDS & FAMILY FORM

Can you please help Workwise with this survey?

To be answered (only if you wish) by partners, family, friends or housemates of Workwise Trainee workers without in-put from the trainee, please.

Before the trainee (whoever you are involved with –no names please) was involved with Workwise, how did their mental ill-health effect your life?

Have you noticed any changes since they have been working at Workwise?

Has this made your relationship/friendship with them any better or had any effect on your life as a result?

Is there anything else you would like to tell us about? (e.g. Products they have been involved with or qualification achievements) How you felt about this?

VOLUNTEERS' FORM

Workwise really appreciates the time, dedication, expertise and service our volunteers give us. As stake-holders in Workwise, we would like to add the opinions of our volunteers as a part of the Workwise social return on investment forecast for the coming year. Can you please help Workwise with this by answering a few questions?

- How much time do you give to Workwise voluntarily? ___ hours per week (*or month*)
- What made you pick Workwise as an organisation to volunteer for? What did you think it had to offer you?
- Have your expectations been met? (*Do you get what you hoped for out of your volunteering?*)
- If you were not volunteering for Workwise, how would you use this time or gain same “satisfaction”?
- How would you value your time as being worth? _____ per hour. (*It would help us if you can put a figure, but if you would rather not, we understand and will use an estimate.*)
- In your opinion what do you think Workwise does well?
- What would you suggest that Workwise could improve on?

REFERRERS' FORM

If you have referred clients to Workwise, you are one of our stakeholders and as such, we value your opinion. Would you be so kind as to help Workwise with some information gathering for a report on social return on investment.

- What do you mainly want/expect your clients to gain by attending Workwise?

- To what extent do you feel they achieve your/their expectations?

- To what extent does your client's attendance at Workwise help to reduce their reliance on/needs of the CMHT? *(Do you find clients are more likely to move forward with their life/improve their mental well-being?)*

- What do you think that Workwise can offer your clients that other organisations don't?

- With your experience of referring to Workwise, are there improvements or additions to the service that you would like to see?

Social Return on Investment – The Impact map

Organisation		Workwise (Suffolk) Ltd				
Objectives		<p>Initially Workwise was asked to undertake training in the methodology and development of an Impact Map and SROI Report. This training and support was being offered by SIEF as a basis for a future training course that could be offered to organisations that may be required to produce social return on investment forecasts for their projects in future.</p> <p>Workwise considered the work and staff time involved against the benefits to the organisation of creating our own SROI Report. It was decided that it was a very worthwhile opportunity. Once embarked on the project, it became obvious that Workwise would be able to use this work, not only to find out what social impact we could show our organisation provides, but also to better understand implications of this effect for our future planning and development. It was decided that the whole organisation would be included in this project.</p> <p>The objective for this project was therefore to:-</p> <ul style="list-style-type: none"> · Make use of the training and support available to produce an Impact Map and SROI Report as a Forecast for the year April 2009 to March 2010 for Workwise as an organisation. · To identify suitable indicators that would enable us to measure the soft outcomes and social impact for mental health of providing supported work-experience and training within the framework of social enterprise. · To produce a working document that can be used to demonstrate the social value of investing in Workwise and to make a forecast as a base for identifying changes necessary to sustain and improve our social value. 				
Overall theory of change		<p>Workwise faced external changes to funding methods, referral methods and to adult education that would all impact on the service in the coming year. This was therefore an excellent opportunity to assess the service within an SROI forecast for the organisation. By putting out a good average of provision and capacity from the last few years and balancing this with new surveys and interviews and the implementation of the new systems, we would be able to obtain a base start for our social impact on mental health to help us to assess effect and build in improvements for the organisation and its stakeholders to maintain and improve our future development.</p> <p style="text-align: center;">We have worked hard to make the transition to new systems as seamless as possible for our stakeholders. We found however several interesting points from our surveys and consultations. Firstly we found that involvement in the production of quality items for sale to the public had a real impact on trainees' mental well-being and also friends and family reported that they found a noticeable social improvement in their involvement with Workwise.</p>				
Values		Workwise is a Suffolk based charity with a difference. Started in 1986 Workwise is an organisation devoted to assisting people who are recovering or attempting to recover from long and enduring mental health problems. Initially Workwise provided somewhere to go with light repetitive work but since we have developed into a specialist training centre with social enterprise workshops. Workwise offer work-based rehabilitation and training to adults aged 18 - 65 across Suffolk and south Norfolk.				
Scope	Activity	For the purpose of this Impact Map and SROI Report, Workwise considered if it was more practical to look at a part of or the whole organisation. As each part and department relies to some extent on other areas/departments for overall results, it was decided that the whole organisation would be included in the project.	Time Scale (years)	April 2009 to March 2010	Name	
	Contract/Funding/Part of org'		Forecast or evaluate Social Return	Forecast	Date	

Social Return on Investment - The Impact Map

SROI Network

Stage 1		Stage 2			Stage 3	
Stakeholders	Intended/unintended changes	Inputs		Outputs	The Outcomes (what changes)	
Who will we have an effect on? Who will have an effect on us?	What do we think will change for them?	What will they invest?	Value £	Summary of activity in numbers	Description How would we describe the change?	Indicator How would we measure it?
Trainees - who spot purchase (or use their direct payments) for day places	Trainees get out of the house to do something useful- improve status, build work stamina, communicate in a working environment, to gain work experience or work taster in new skill, gain voluntary work, or gain paid or self employment P/T or F/T.	Time, effort, commitment, skills and previous experience	£133,495.00	105 day placements for work experience and skills.	Trainees are engaged in purposeful activity that they consider 'worthwhile'	Trainees in work in placements in social enterprise for those who would not otherwise have had access a reemployment support partnership responsible job at this time. Trainees reporting that they were engaged in worthwhile activity and had structure in their lives and less anxiety, isolation, depression Family and friends reporting improvement in mental-well being of these trainees
				Access to workplace - 3000 seats in hospital transport a year	Trainees access service by hospital transport (for those to whom public transport is either too difficult or inappropriate to their mental state at that time) Trainees access service by public transport, or own transport, and so increase their independence.	Journeys facilitated a year Journeys by public/own transport a year Trainees reporting becoming more independent
	Improving their mental well-being: Each individual has own needs, usually to gain self confidence and communication, self esteem, a feeling of inclusion and a feeling of self worth.			Trainees confidence and motivation increased	trainees with expectations met or exceeded	
				Trainees develop design skills and potential Trainees mental well-being, self-esteem and motivation increased by having their products and art accepted for sale.	Products designed by trainees Reduction of involvement by community mental health team as trainees' mental well-being improves	
				Trainees find environment and support networks too structured and feel that they no longer have control over their lives	Trainees reporting that everyone else makes decisions for them	
	Up-date skills or achieve a qualification - finding motivation to do so			90 training places towards national qualifications (embedded in work placements) E9	Trainees receive opportunity to learn, towards more job reemployment support partnership responsibilities and for future mainstream employment	No of individuals returning to LLL (For qualifications achieved see below)
Support towards employment and career matching, creating CV, job search and work prep.	440 1-to1 support sessions	Trainees become work ready	trainees becoming work ready			
Trainees - employment provision (those who access services other than day placements)	Employment status: to find employment, work experience, work tasters or voluntary work with social inclusion . Cope with mental health issues in the workplace Employment Skills: Expectation from the stakeholder that they will get help with: Info Advice & Guidance, career matching, routes to employment and/or education, CV, job Up-date skills or achieve a qualification: training and qualifications for adults in an environment suited to people with mental health problems	Time, commitment, effort	£0.00	1026 careers info, advice and guidance opportunities (career matching, CVs, job search)	Trainees independence and work readiness increased	trainees progressing towards work/volunteering/self employed/life goal
			£2,500.00	40 reemployment support sessions (interviews, work retention, mental health recurrence)	Trainees deal positively with work related mental ill health issues	Clients contacting the employment advisor over a job related problem Number gaining employment and coming off IB
Families / friends of trainees	To see an improvement in the mental well-being and independence of the individual	Care and concern	£0.00	7 day placements for work experience and skills	Trainees begin learning toward qualification while also using those skills and working in a supportive, but real business environment	Worklink clients joining training qualification
				Trainees mental well-being improved (improved confidence, self-worth, self-reliance and a new pride and motivation in their achievements) Families/Friends have less pressure/more time as trainees access service by public transport and so increase their independence.	identified above to be measured . . .	
Employers	Employment opportunities mental well-being of workforce	time money and job opportunities		4 pieces of consultancy work	employers mindful of mental health issues	employers taking up consultancy and/or gaining awards for being mindful of mental health issues
Big Lottery	Improved mental health: self esteem, confidence, employment prospects for 80 clients. Work placements and work experience. Marketing and business development for 4 Social Enterprises: income, publicity.	Funding	£32,790.00		material changes shown in trainee and Cavern4 outcomes	
Grant Making Trusts (see list)	Training and accredited qualifications, product development, increased confidence, self esteem, skills, employment, for adults with mental health problems. Employment, training, qualifications, self esteem, confidence for adults with mental health problems income, publicity, community asset.	Funding -Salary and development costs for furniture making department Shop Manager salary Employment Advisor salary	£53,300.00		material changes shown in trainee outcomes and social enterprise	
			£25,000.00			
Statutory Funders - (PCT, Suffolk Social Services, Norfolk Social Services) employment support partnership tendering partners (similarly funded and working with Workwise in partnership via Shaw Trust)	To have access to supported work experience day placements with training options for adults with mental health problems to be provided at Workwise from an interim payment funding from SSS before personal budgets are established Provide job search support for adults with mental health problems via Workwise, with 2 employment advisors - confidence building and self esteem, career matching, CV preparation, skill acquisition, employability and life skills, job search and sign posting if necessary, working towards employment and/or training.	Partners with PCT - Mental Health Pooled funding for 2 Employment Advisors (£ 75,000) 10x 2 hours group training sessions for Worklink £7500	£32,964.00		Material outcomes for trainees (trainees recovery sustained)	
			£73,749.00			
Business Link	Marketing, Business planning and Tender support.	Business Support	£1,500.00	2 marketing projects	Material outcomes for trainees	
SEIF	Marketing . . . Business planning and Tender support.	Business Support		2 social enterprises developed		
	To encourage and improve the development of social enterprise	Consultancy - SROI training	£18,300.00	1 SROI report	Material outcomes for trainees	

Stakeholders	Intended/unintended changes	Inputs		Outputs	The Outcomes (what changes)	
		What will they invest?	Value £		Description	Indicator
Who will we have an effect on? Who will have an effect on us?	What do we think will change for them?			Summary of activity in numbers	How would we describe the change?	How would we measure it?
Adult Further Educational funding West Suffolk College	Delivery of agreed courses to adults with mental health problems who are not ready to engage in main stream learning but appreciate being taught in small groups with understanding of mental health issues and where they can have individual support when necessary.	QA checks of Workwise training systems and draw down of funding for course delivery	£42,112.44		West Suffolk College's meet requirement for inclusion of a disability group	Number - Retention of enrolments with mental ill health
		Provision of qualification awarding body EV visits.			Access to staff training	West Suffolk College keep their numbers of special disability delivery up by support of Workwise as a Partner Provider.
Employees	Employment, skills, training, experience and income.	Time, commitment, effort, skills, expertise and experience.		15 staff employed	Workwise staff have job satisfaction	
Directors and Volunteers	To help Workwise and adults with mental health issues by offering of themselves as directors/experts in business fields for the good of the service.	Time at variable wage equivalent of at approximately £40 an hour for 36hours a year	£1,440.00	10 board meetings providing accountability and strategic planning	directors and volunteers feel they make a difference to others - <i>material change for others (employees, trainees, etc) identified above</i>	
	To work with staff to give their support and skills to the organisation to keep their own skills up to date, improve their CV and give back.	Time at variable wage equivalent of approximately £8.50 an hour for average of 6 hours a week	£2,448.00	Supporting staff members in key areas		
Suppliers who become Donators (in kind)	Recycling products rather than sending to landfill	Unwanted products and materials		10 parcels of materials	<i>Material outcomes for trainees (trainees develop new designs to suit materials received)</i>	More profit gained from goods made with these materials
	Social giving programme for their employees				Income for social enterprise from supply of materials that increases profit margin of products	
Referral Agents-(see list)	Suitable supportive placements for clients to continue their recovery from mental ill-health and reduce their need for support. Fulfillment of targets towards individual goals	Time, effort, skills,		Progression for their clients to improve and sustain recovery from mental ill health and move them towards reliance on services	Referral agent's client lists are reduced as trainees become less reliant on Community Mental Health services	Reduction of involvement with their Community Mental Health Team
Public and local community - Customers	Purchase of goods and products. Support of Workwise, its work and its products.	Money, investment, time, effort/interest	£55,320.30	Income for Workwise Income for sale of own products	Personal <i>Material outcomes for trainees</i>	
Artists	Sale of products	Value of profit to Workwise	£12,360.00	£28,800 of sales	<i>Material outcomes for trainees</i>	Artists support Workwise by offering their products for prize draw
	Prestige and social awareness of selling in Cavern4	Products, time, flare and effort.		77 artists	Artists acknowledging the standard of products produced by trainees is comparable to theirs	
Suffolk Mental Health Partnership Trust	Premises	Supported care of building, surrounds and peppercom rent for site		Use of NHS Trust building on site at Hospital road	Allowance for rent of building on NHS site for Workwise as a independent provider of services for mental health as rated by the Trust	Allowance for annual rent
	Payment for transportation of individuals where to use public transport isn't appropriate	Provision of transport services for people on care plan approach	£3,178.00	Transportation to and from work for 2758 return journeys per year	<i>Material outcomes for trainees</i>	
Total			£490,456.74			

Source	Quantity	Duration	Financial Proxy	Value £	Source	Deadweight %	Displacement %	Attribution %	Drop off %	Impact
Where did we get the information from?	How much change will there be?	How long will it last?	What proxy did we use to value the change?	What is the value of the change?	Where did we get the information from?	What would have happened without the activity?	What activity would we displace?	Who else would contribute to the change?	Will the outcome drop off in future years?	Quantity times financial proxy, less deadweight, displacement and attribution
West Suffolk College and Workwise records	46	1	Average course cost of training costs =£689-achievement of approx £107 with a third taking 2 courses	£883.00	West Suffolk College Partnership breakdown figures	5%	5%	2%	0%	£35,924.59
West Suffolk College and Workwise records	41	1	Additional achievement payment	£107.00		5%	0%	0%	0%	£4,167.65
	0	1		£0.00		0%	0%	0%	0%	£0.00
						0%	0%	0%	0%	£0.00
sales figure	1	1	market value of goods	£1,500.00	estimated market values	0%	0%	0%	0%	£1,500.00
Trainee / Worklink records	12	1	Per hour of client contact costs mental health professional £55 @ average of 30 hours/year	£1,650.00	Unit cost of Health & Social Care 2008	0%	0%	0%	0%	£19,800.00
						0%	0%	0%	0%	£0.00
		1				0%	0%	0%	0%	£0.00
Cavern 4 birthday draw	26	1	Market value of goods donated estimated at around £1200 - average £46.50	£46.50	Cavern 4 sales information	0%	0%	0%	0%	£1,209.00
Workwise accounts	1	1	Value of rental of portable building	£8,000.00	SMHP Trust account	0%	0%	0%	0%	£8,000.00
	0	1				0%	0%	0%	0%	£0.00
										£923,659.91

Calculating Social Return					
Discount rate		3.5%			
Year 1 (after activity)	Year 2	Year 3	Year 4	Year 5	
£35,924.59	£0.00	£0.00	£0.00	£0.00	£0.00
£4,167.65	£0.00	£0.00	£0.00	£0.00	£0.00
£0.00	£0.00	£0.00	£0.00	£0.00	£0.00
£0.00	£0.00	£0.00	£0.00	£0.00	£0.00
£0.00	£0.00	£0.00	£0.00	£0.00	£0.00
£1,500.00	£0.00	£0.00	£0.00	£0.00	£0.00
£19,800.00	£0.00	£0.00	£0.00	£0.00	£0.00
£0.00	£0.00	£0.00	£0.00	£0.00	£0.00
£0.00	£0.00	£0.00	£0.00	£0.00	£0.00
£1,209.00	£0.00	£0.00	£0.00	£0.00	£0.00
£8,000.00	£0.00	£0.00	£0.00	£0.00	£0.00
£0.00	£0.00	£0.00	£0.00	£0.00	£0.00
£923,659.91	£409,486.42	£226,784.39	£23,960.83	£19,972.43	
Total Present Value (PV)					£1,516,928.24
Net Present Value (PV minus the investment)					£1,026,471.50
Social Return £ per £					3.09

Present value of each year
Total Present Value

£892,425.03 £395,639.05 £219,115.36 £23,150.56 £19,297.03
£1,549,627.03